

# CANDIDATE'S REPORT

(to be filed by a candidate or his principal campaign committee)

1. Qualifying Name and Address of Candidate

MAYSON H. FOSTER  
800 W. DAKOTA  
HAMMOND LA 70401

2. Office Sought (Include title of office as well as parish, city, town and/or election district.)

MAYOR, CITY OF HAMMOND  
TANGIPAHOA PARISH

OFFICE USE ONLY

10/02

Supp  
1/10

3. Date of Primary

OCTOBER 5 2002

This report covers from JANUARY 1, 2013 through DECEMBER 31, 2013

4. Type of Report:

\_\_\_\_ 180th day prior to primary  
\_\_\_\_ 90th day prior to primary  
\_\_\_\_ 30th day prior to primary  
\_\_\_\_ 10th day prior to primary  
\_\_\_\_ 10th day prior to general  
\_\_\_\_ 40th day after general  
\_\_\_\_ Annual (future election)  
☒ Supplemental (past election)  
\_\_\_\_ Amendment to prior report

5. FINAL REPORT if:

\_\_\_\_ Withdrawn  
\_\_\_\_ Filed after the election AND all loans and debts paid  
\_\_\_\_ Unopposed

6. Name and Address of Financial Institution (You are required by law to use one or more banks, savings and loan associations, or money market mutual fund as the depository of all campaign funds.)

WHITNEY BANK  
SW RAILROAD AVE  
HAMMOND, LA 70403

7. Full Name and Address of Treasurer

N/A

9. Name of Person Preparing Report


MAYSON FOSTER

Daytime Telephone

985-277-5605

10. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no expenditures have been made nor contributions received that have not been reported herein, and that no information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted.

This 9th day of JANUARY 2014

  
Signature of Candidate/Chairperson  
(To be signed by Chairperson only if report by principal campaign committee)

985-277-5605  
Daytime Telephone

N/A  
Signature of Treasurer

Daytime Telephone

8. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY  
a. Name and address of principal campaign committee, committee's chairperson, and subsidiary committees, if any (use additional sheets if necessary).

JAN 14 AM 9:53  
RECEIVED

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## SCHEDULE B: LOANS RECEIVED

The following information must be provided for each loan or line of credit received this reporting period, even if it has been repaid. Also, complete this schedule for loans received in prior periods that are still outstanding. Separate loans must be reported separately, even if from the same source. Any personal funds a candidate loans to his campaign must be reported on this schedule.

<p>1. Name and address of lender</p> <p style="font-family: cursive; font-size: 1.2em;">MAYSON H. FOSTER 800 W. DAKOTA HAMMOND, LA 70401</p>	<p>2. a. Date* <u>7/2/2002</u>      b. Interest rate <u>0</u> % (a.p.r.)</p> <p>c. Amount borrowed* ..... \$ <u>20,000<sup>00</sup></u></p> <p>d. Balance due ..... \$ <u>8312.38</u></p> <p><small>*For lines of credit, give the date the line of credit was first committed at Item 2a and list only the amount actually drawn at Item 2c. OPTIONAL: Total amount of credit available \$ _____</small></p>
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<p>3. Endorsers/Guarantors</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 33%;">4. Repayments this period</th> <th style="width: 33%;">Principal</th> <th style="width: 33%;">Interest</th> </tr> <tr> <td style="height: 150px; vertical-align: middle; text-align: center; font-size: 2em;">0</td> <td></td> <td></td> </tr> </table>	4. Repayments this period	Principal	Interest	0		
4. Repayments this period	Principal	Interest					
0							

(Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)

(List payments of principal and interest separately. If separate amounts are not known, list all payments under principal.)

<p>1. Name and address of lender</p>	<p>2. a. Date* _____ b. Interest rate _____ % (a.p.r.)</p> <p>c. Amount borrowed* ..... \$ _____</p> <p>d. Balance due ..... \$ _____</p> <p><small>*For lines of credit, give the date the line of credit was first committed at Item 2a and list only the amount actually drawn at Item 2c. OPTIONAL: Total amount of credit available \$ _____</small></p>
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